

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD_R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	No
Computer Readable Form (CRF)?::	No
Title::	AUTO ENRICHER
Attorney Docket Number::	7432.186US01
Request For Early Publication::	No
Request For Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	6
Small Entity::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

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Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: KURT
Middle Name::
Family Name:: SIGERUD
Name Suffix::
City of Residence:: GOODRIDGE
State or Province of Residence:: MINNESOTA
Country of Residence:: UNITED STATES
Street of mailing address:: 38287 STATE HWY 1 NE
City of mailing address:: GOODRIDGE
State or Province of mailing address:: MINNESOTA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 56725

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: MIKE
Middle Name::
Family Name:: TURSKY
Name Suffix::
City of Residence:: FOND DU LAC
State or Province of Residence:: WISCONSIN
Country of Residence:: UNITED STATES
Street of mailing address:: 30 CHAMPION AVE.

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City of mailing address:: FOND DU LAC
State or Province of mailing address:: WISCONSIN
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 54935

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: TED
Middle Name::
Family Name:: BETTIN
Name Suffix::
City of Residence:: THIEF RIVER FALLS
State or Province of Residence:: MINNESOTA
Country of Residence:: UNITED STATES
Street of mailing address:: 12833 147TH AVE. NE
City of mailing address:: THIEF RIVER FALLS
State or Province of mailing address:: MINNESOTA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 56701

Correspondence Information

Correspondence Customer Number:: 23552

Representative Information

Representative Customer Number::	23552
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Assignee Information

Assignee Name:: ARCTIC CAT INC.
Street of mailing address:: P.O. BOX 810, 601 SOUTH BROOKS AVENUE
City of mailing address:: THIEF RIVER FALLS
State or Province of mailing address:: MINNESOTA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 56701